

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
09874102

APPLICANT(S)

FILING DATE  
06-05-01

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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49	1					
50	1.					
TOTAL IND.	6	1				
TOTAL DEP.	44	3				
TOTAL CLAIMS	50					

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99					
100					
TOTAL IND.	1				
TOTAL DEP.	0				
TOTAL CLAIMS	1				